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SYM 116/118 Attorney Docket Number **DECLARATION FOR UTILITY OR** Philip M. Beart First Named Inventor **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number 60/229,952; 60/23 September 1, 2000 Filing Date Declaration Declaration OR Submitted after Initial Submitted Group Art Unit with Initial Filing (surcharge (37 CFR 1.16 (e))

Examiner Name

As a below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
Screen For Glutamate Re	Screen For Glutamate Reuptake Inhibitors, Stimulators, and Modulators						
the specification of which	(7	Fitle of the Invention)					
] is attached hereto OR was filed on (MM/DD/YYYY)		as United S	tates Application	Number or PCT International			
Application Number	and was a	 imended on (MM/DD/YY	YY) [(if applicable).			
I hereby state that I have reviewed amended by any amendment spe	d and understand the co	ontents of the above ider	ntified specificatio	n, including the claims, as			
I acknowledge the duty to disclose in-part applications, material inforr PCT international filing date of the	nation which became a	vailable between the filir	s defined in 37 CF ng date of the prio	R 1.56, including for continuation- r application and the national or			
I hereby claim foreign priority ben certificate, or 365(a) of any PCT i America, listed below and have certificate, or any PCT internations	nternational application also identified below.	which designated at lea	ast one country o	ther than the United States of			
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
Additional foreign application	☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
Application Number(s)	Filing Dat	e (MM/DD/YYYY)	numbers supplem	al provisional application s are listed on a ental priority data sheet /02B attached hereto.			

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	Customer Nur r Bar Code L	1			OR 🗶	Correspondence address below
Name Patrea L. Pabst						
Address 1201 W. Peachtree	Street					
Address Suite 2000				.		
City				State	GA	ZIP 30309
Country		Telephone	404-8	17-847	73	Fax 404-817-8588
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INV	ENTOR:			A petiti	on has been fil	ed for this unsigned inventor
Given Name Philip M (first and middle [if any])	,			Family I or Surn	Name Beart	
Inventor's Signature						Date
Residence: City Ivanhoe			State		Country Austra	li. Citizenship
Mailing Address 87-89 The Bou	levard					
Mailing Address						
City Ivanhoe	State			ZIP	3079	Country Australia
NAME OF SECOND INVENTOR	:			A petiti	on has been fi	ed for this unsigned inventor
Given Name Ross D. Family Name O'Shea (first and middle [if any]) or Surname						
Inventor's Signature						Date
Residence: City Blackburn			State		Country Austr	Citizenship
Mailing Address 32 Rishon Av	enue					
Mailing Address						
city Blackburn	State			ZIP 3	130	Country Australia
Additional inventors are being named	on the	supplemen	ntal Addition	nai Inven	tor(e) sheet(s) PT	0/SB/02A attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page ___ of ___

Name of Additional Joint Inventor, if any:						
Given Name (first and middle [if any])) Family Name or Surname				name	
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Inventor's Signature Date						
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Mailing Address 11 Practico Court						
Mailing Address						
City Forest Hill	State		ZIP 3130 Co	untry	Australia	
Name of Additional Joint Inventor, if an	y:		A petition has been filed fo	r this	unsigned inventor	
Given Name (first and middle [if any])		Family Name	or Su	mame	
Andrew J.			Lawrence			
Inventor's Signature					Date	
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Name of Additional Joint Inventor, if any:						
Given Name (first and middle [if any])		Family Na	me o	r Surname	
Maria-Luisa Maccecchini						
Inventor's Date						
Residence: City West Chester	State PA Country United States Citizenship			Citizenship		
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city West Chester	State PA		ZIP 19388	Co	untry United States	

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DECLARATION — Supplemental Priority Data Sheet

Additional foreign applica	tions:			
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO

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